



ICD Rehabilitation and Research Center

18 Month Report

July 1, 1976—December 31, 1977

Fulfilling the ICD Commitment



Cover

Through the ICD's pioneering Projects With Industry program, handicapped college graduate Ralph Johnson is successfully employed in a responsible position as a technical writer with Engineering Index, Inc. With him are John C. Deely, Director of the Projects With Industry program, and Daniel Dosamantes, Manager of the Editorial Division at Engineering Index. Projects With Industry has placed more than 50 handicapped college graduates in jobs for which they are qualified.

The ICD Rehabilitation and Research Center was founded by the late Jeremiah Milbank in 1917 to provide disabled veterans of World War I with a fresh start and a purposeful place in American life.

Today, ICD is one of America's leading non-profit centers for all people who can benefit from its work. Programs include rehabilitation research, professional education and comprehensive outpatient services.

ICD is a public charity, serving handicapped persons on the sole basis of their need, without regard to race, color, religion or ability to pay. Money contributions to ICD are deductible for federal income tax purposes up to 50% of an individual's adjusted gross income.

Many benefactors have arranged for enduring gifts to ICD in the form of tax deductible bequests in their wills. A recommended form is:

"I give, devise and bequeath to the ICD Rehabilitation and Research Center in the City of New York (here state the amount of money or describe the property to be given) for the uses and purposes of said organization." If the bequest is a memorial, these words may be added: "in memory of (name of person in whose memory the bequest is made)."

Fulfilling the ICD Commitment

Contents	Page
Message to our Benefactors and Friends from the Chairman and President	1
Director's Report	7
Commitment to the Handicapped	12
Commitment to Benefactors	15
Commitment to Rehabilitation Progress	16
Commitment to the Community	18
Financial Report	20
Officers, Board of Trustees and Staff	23
Pioneering Accomplishments of the ICD	24

About This Report


In compliance with New York State requirements, the ICD has changed its annual reporting period from a fiscal to a calendar year basis.

In October 1977 we issued an Interim Report covering the 12-month period, July 1, 1976 through June 30, 1977. This Report covers the 18-month period ended December 31, 1977. Our next Annual Report will be for the year ended December 31, 1978.

This report was made possible through the generosity of a friend and benefactor of the ICD.

Professionally affiliated with New York University.

To Our Benefactors and Friends:



The exciting story of the ICD during the 18 months ended December 31, 1977 is not fully revealed in the fact that we served more handicapped people, 3,486 in all, than in any comparable prior period. Most gratifying are the innovative changes we have made to expand and improve our services, the initial results of doing so, and the potential we now have for enabling the handicapped of all ages to enjoy better lives.

The ICD today has rehabilitation programs for the young and the old. We have upgraded our comprehensive services for those of working age so that they can qualify for higher-paying entry jobs and opportunities for advancement.

Here are examples of what this has meant to the handicapped:

□ An attractive teenager with brain damage dating from birth came to the ICD for vocational and psychosocial rehabilitation. After thirteen months of training and treatment, she is now successfully employed by a major bank as an operator of sophisticated word processing office equipment.

□ A mother brought her stuttering eight year old to the ICD, hopeful that something could be done to help the child. After just 90 days of precision fluency shaping therapy, a technique adapted at the ICD for the outpatient treatment of stutterers, the youngster speaks without faltering.

□ More than 25 executives of leading financial and business firms, labor organizations and government agencies became members of our Projects With Industry Advisory Com-

mittee in 1977. They helped our staff work out a program for the employment of handicapped college graduates. More than 50 have been placed in suitable positions and the program has been expanded to include general employment for other handicapped persons.

□ After five years of research, development and field testing, the ICD introduced Micro-TOWER™, a new and better way to determine the employment potentials of handicapped persons. It does in 3 to 5 days what other vocational evaluation systems do in 3 to 5 weeks. Moreover, it is a group technique capable of evaluating 4 to 30 persons at one time. This makes work evaluation a basic necessity in vocational rehabilitation, available to many more handicapped people. And the ICD is making Micro-TOWER available to all other organizations that serve the disabled and the disadvantaged.

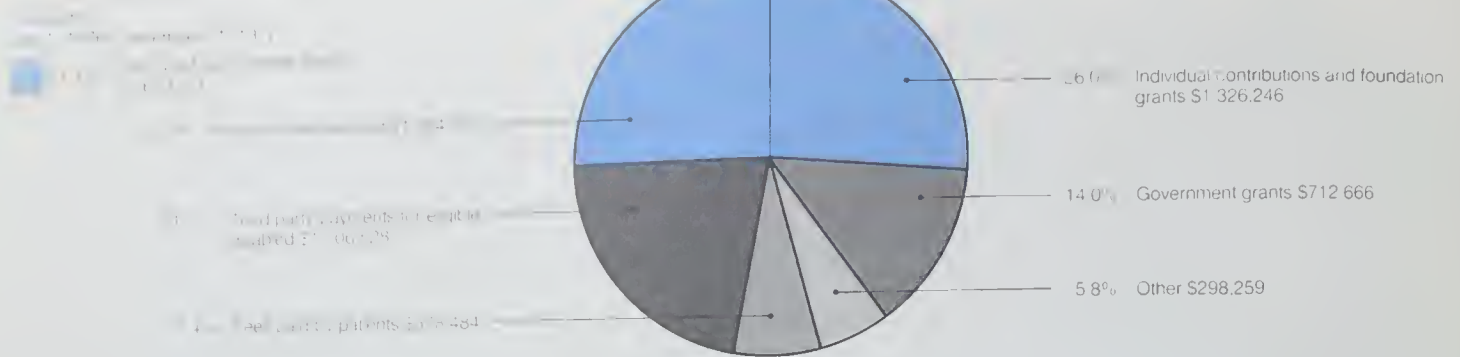
□ For elderly people, the ICD established a pioneer program to help them go on living independently in safety and comfort. After a year of planning and development by staff specialists in gerontology, reality orientation and attitude therapy, the Service Program for the Aged started in January 1978. A precedent in responsive care for the elderly is being set.

These examples typify the ICD's contemporary effort to fulfill its 61 year old commitment to the handicapped, to our benefactors, to the progress of rehabilitation science and to the community. The commitment was made by the late Jeremiah M. Bank in 1917 when he founded



Mr. J. M. Bank
President, ICD

Where the ICD obtained its funds



the ICD, then the Institute for the Crippled and Disabled, as the Nation's first rehabilitation facility. Through the years, the commitment has consistently been honored in ways that meet the needs of handicapped persons in their own time.

Three years ago, the Board of Trustees set agency-wide goals for the ICD in the 1975-1980 period. We would like to share them with you, and report what we are doing in pursuit of their achievement.

Intensify Research, Patient Services and Professional Education Programs; Make Them More Mutually Productive.

The ICD is a rehabilitation center. Our research seeks to improve the effectiveness of established rehabilitation practices, develop new services for the disabled whose needs are not being met, and extend the benefits of the rehabilitation process to other health care fields.

The developments of ICD research are clinically tested in our treatment and training programs, and elsewhere. We disseminate results of proven value to all whose work is improving the human condition.

These three broad areas of ICD activity now have a common focus. Needs and accomplishments in one area become matters for attention and action by the others. Our research, professional education and patient service staffs function as a harmonious, close-knit team.

Timely Criteria for Program Evaluation and Development.

New life styles, shifts in economic

and social conditions, scientific and technological progress, legislation, public attitudes—all of these factors can affect the lives of handicapped people more than they affect the non-disabled who have greater freedom of opportunity and choice.

The ICD has developed criteria for the constant evaluation of established programs to make certain they are in step with the times, for determining the need for new programs and, if there is need, what the nature of the new programs should be.

The criteria themselves are frequently reviewed to assure that they are as timely as our programs.

Meet the Rehabilitation Needs of Severely Handicapped Persons.

The ICD is a comprehensive center for the handicapped. It provides medical treatment, physical and occupational therapy, psychosocial adjustment, vocational rehabilitation, remedial education, speech and hearing services, reality orientation, attitude therapy and bio-sensory feedback therapy. Services are prescribed specifically for each patient or client on the basis of thorough examination and evaluation.

Many of our handicapped patients and clients come to us with multiple disabilities affecting body and mind. They are the most seriously disabled, the ones least likely to find the care they need elsewhere. The ICD has broadened its services for the severely impaired and seeks to serve more of them.

Enable the Handicapped to Achieve their Full Potential.

Many handicapped people who come to the ICD have high achievement potential. More frequently than not,



Founder's Day Honors

High ICD honors were presented to Andrea Wiener, center, by Mrs. H. Lawrence Bogert, Board Chairman and Jeremiah Milbank, Jr., President, for outstanding accomplishment in overcoming her disability and succeeding in her job. The presentation marked the start of the ICD's 1977 Founder's Day observance, a Hudson River cruise and Day in the Sun for more than 1,500 handicapped New Yorkers.

Learning to Care for Herself

This handicapped young woman is taught how to prepare her own meals in the ICD's Occupational Therapy Department.



How the ICD's funds were used

18 months
July 1, 1976 - December 31, 1977

100% Patient services

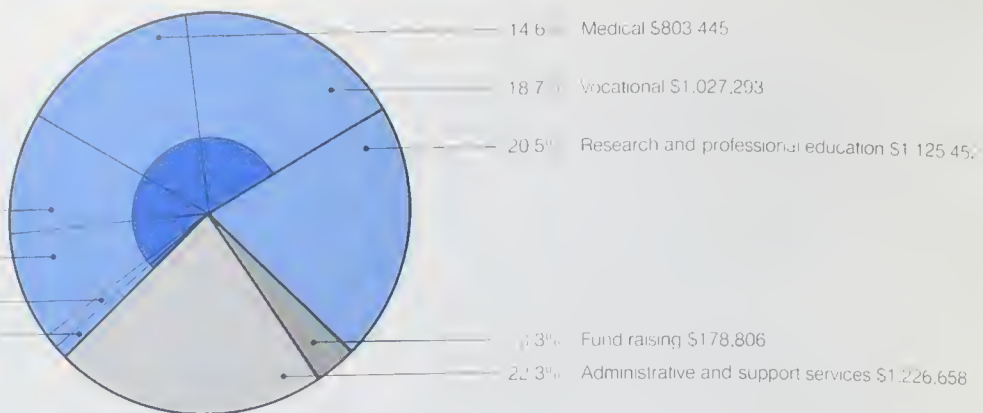
14.4% Professional services, Research and professional education

1.7% Social adjustment

9.1% Speech and hearing

8.1% Projects With Industry

1.3% Service Program for the Aged



they have been denied the opportunity to make the most of their abilities by two things: physical or emotional impairments, and the hesitance of others to accept them for what they can do. The ICD has augmented its services that enable handicapped persons with strong achievement potential to realize their capabilities in full.

Agency of Choice for Overcoming Certain Handicaps.

The ICD today has special rehabilitation programs for persons who have had their voice boxes removed due to throat cancer, stutterers, torticollis (wry neck) cases, victims of stroke and certain other types of brain damage, and for the emotionally handicapped.

For persons, particularly the elderly who are handicapped by disorientation, confusion and withdrawal from life, and for professionals who serve them, the ICD has established a Reality Orientation Center for the Northeast U.S.

Maximize Relationships with the Business Community in the Mutual Best Interests of Employers and the Rehabilitated Handicapped.

Government legislation mandates that handicapped people have equal opportunity and not be discriminated against in their search for employment. Only token compliance with the law can be expected unless hiring the handicapped makes good business sense.

This requires that the disabled job applicant be qualified for the position he or she seeks. It also requires that the employer's recognition of the

applicant's qualifications not be obscured by the presence of disability.

The ICD is working closely with a growing number of cooperating business and financial firms to assure that their employment of the handicapped does, indeed, make good business sense. Increasingly, employers are asking us to provide them with qualified candidates for position vacancies they want to fill.

We serve as advisors to employers on sound practices for hiring the handicapped. This includes counseling on working conditions, architectural barriers and the types of employment within a given company that rehabilitated handicapped people can do.

Many companies we are working with have basically competent employees, some in managerial and supervisory capacities, who have developed problems that interfere with their performance. In terms of their jobs, they have become disabled. The professional services of the ICD often can help employees to overcome performance-disrupting problems. We are making these services available to employers who wish to retain troubled but valued members of their organization.

Agency Wide Management in Depth.

The ICD is continuing to grow, in the professional quality of its programs, the breadth of its services, and in the number and diversity of handicapped persons served. This has necessitated increasing our authorized staff from 122 to 152 over the past eighteen months.

In order to respond to the needs of more handicapped persons with a

larger organization, management and supervisory skills at all levels are being sharpened through a new Staff Development Program. Major areas of emphasis include effective participation in achieving agency-wide objectives, living within our financial means and making efficient use of staff time.

Progress Through Joint Ventures.

A little over a year ago, the ICD launched an intensive effort to establish joint professional endeavors with organizations whose purposes, capabilities and operations complement our own. Several innovative projects have resulted from this; others are in various stages of development. We have new programs for handicapped teenagers, stroke victims and elderly persons experiencing senility.

Other joint endeavors are being developed with the New York Infirmary's Center for Independent Living, the U.S. Veterans Administration, The Horizon School and Beth Israel Medical Center, to mention a few.

Adequately Financed Rehabilitation Center.

Progress is not without its price. This is especially true for a non-profit organization like the ICD seeking to improve and expand what it does in a period of chronic inflation. In order to avoid the financial straits into which so many health related organizations have fallen, we continue to exercise strict budget controls that stretch every dollar to the limit.

It cost almost \$5,500,000 to operate the ICD for the eighteen months ended December 31, 1977.

Mrs. Eugene R. Ball
 Mrs. Lawrence Bogert
 Anthony B. Evnin
 Robert B. Rivel
 Edward R. Downe, Jr.
 David S. Reynolds
 Honorable Joel J. Tyler



David S. Reynolds, Ph.D.
 Assistant Director, 1978

We had a net deficit of approximately \$387,963 or seven percent of expenses. This was met by using a portion of our reserves accumulated in prior years for such a contingency.

Almost three-fourths of our expenditures for the period went directly for services to patients and clients, research, and professional education. Administrative and support services were approximately 22 percent of expenses; fund raising costs were 3.3 percent.

Fully half of our income for the period came from the generosity of present and past donors in the private sector. About one-fifth of income came from fees paid by government agencies for services rendered to handicapped persons eligible for aid under federal-state legislation. Grants by government agencies to conduct specific programs aggregated one-seventh of our total revenue.

Thanks mainly to the loyalty of our contributors, the ICD remains financially strong. As always, we shall continue to justify their support by assuring that every grant and gift goes for the purpose intended—restoring destitute handicapped people to lives of meaning and purpose.

Trustees and Administration

We are pleased to report the elections of five distinguished members of the community to the Board of Trustees. They are Mrs. Eugene R. Ball, a leader in many civic and philanthropic activities; Edward R. Downe, Jr., Founder of Downe Communications, Inc.; Anthony B. Evnin, an investment advisor at Rockefeller Family and Associates; Robert B. Rivel, President and a Trustee of the Union Dime Savings Bank, and the

Honorable Joel J. Tyler Acting Justice of the New York State Supreme Court and a former patient of the ICD.

David S. Reynolds, Ph.D., became the Assistant Director of the ICD in January 1978. He was formerly the New York State Department of Mental Hygiene's Long Island Regional Director. Dr. Reynolds is a recognized authority in health care planning, policy development, management and administration.

In Dr. James C. Folsom, our accomplished Director, and Dr. Reynolds, the ICD has a most capable and enlightened top management team.

Outlook

The year ahead promises to be a period of rewarding accomplishment for the ICD. We are confident that the innovative programs started during the past year and a half will become increasingly meaningful, and that plans and concepts under development will materialize into activities that add an even broader dimension to the science of rehabilitation.

With the continued generosity of contributors on which the good work of the ICD so greatly depends, we look forward to pioneering progress that will improve the quality of life for handicapped people everywhere.

Margaret N. Bogert

Mrs. H. Lawrence Bogert
 Chairman, Board of Trustees

Jeremiah Milbank Jr.

Jeremiah Milbank, Jr.
 President





Leonard H. Goldenson, M.D.
Chairman, ABC

Miss Pearl Bailey and American Broadcasting Company Chairman Leonard H. Goldenson, seated front right, received our 1977 Award for singular accomplishment in improving the human condition through communication. Miss Bailey at the Communications Award dinner, ICD President, were Pearl Bailey (left) who presented the Award to Miss Bailey and Leonard H. Goldenson (right) who presided at the dinner.

"If we don't have compassion for our fellow man, we're handicapped."

Pearl Bailey voiced that fundamental truth at our 1977 Communications Award Dinner when she and ABC Chairman Leonard H. Goldenson were presented with the ICD's highest honors for singular achievement in improving the human condition through communication.

In those simple words, Miss Bailey touched upon what I believe is the ICD's finest accomplishment during the past year and a half: humanizing the comprehensive rehabilitation we provide for the disabled.

Our staff has developed a unique ability to provide professional services of the highest quality with compassion, understanding and concern for each of their patients and clients. The rewards of doing so have accrued not only to the handicapped, but to the staff itself. There is a heightened awareness and respect by staff members for the efforts of one another as they work as a team to rehabilitate handicapped people. The staff has a new sense of cohesiveness and unity of purpose, and this is basic to everything else we have succeeded in doing.

It has always been my philosophy that dedicated and capable people must have the opportunity to come forward with their ideas, to exchange their hopes and aspirations for serving the handicapped with their colleagues, to come up with new and better rehabilitation services and, when they do, be encouraged to proceed.

Here are just a few results of doing so:

Agency-wide Services

Of the 3,486 patients and clients served during the 18 months ended December 31, 1977, 1,357 or 39 per cent had multiple handicaps and received treatment or training in two or more of our medical, vocational, social adjustment and speech and hearing departments.

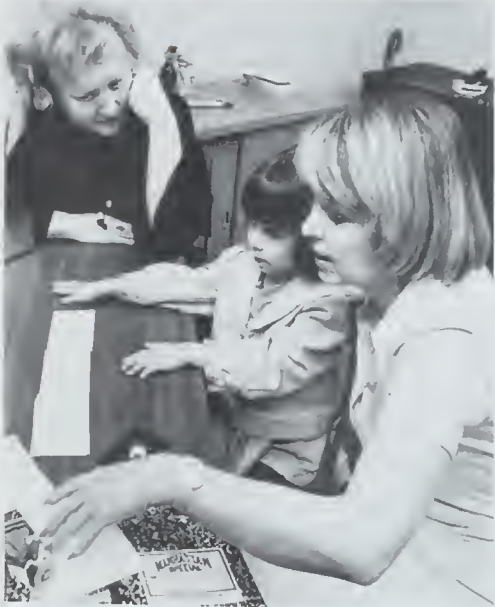
Departmental Services

The Vocational Rehabilitation Service provided almost 1,000 work evaluations. Over 380 clients went on to our training classes, another 316 were enrolled in our industrial workshop and 325 were provided with job placement services.

The Medical Service and the Sensory Feedback Therapy Unit provided 3,200 examinations and almost 25,000 treatments. The Social Adjustment Service administered close to 900 examinations and almost 10,000 therapy sessions. The Speech and Hearing Institute evaluated close to 1,200 patients and gave some 15,600 therapy sessions.

New Services

Senior Companion Program. The ICD, in cooperation with the New York State Department of Mental Hygiene, has developed a program to train 24 older persons so that they can provide Reality Orientation and Attitude Therapy to confused and disoriented elderly people concentrated in the Long Beach, New York community. The majority of the Long Beach elderly have multiple disabilities including speech and hearing



Comprehensive Rehabilitation
Directors of the Vocational, Social Adjustment and Medical Rehabilitation Services coordinate a total program for one of our handicapped patients

Compassionate Care
A four year old patient with articulation and language problems responds to treatment provided with great sensitivity by the Director of ICD's Speech and Hearing Institute and a dedicated speech pathologist

problems, ambulatory difficulties, diabetes and other chronic ailments which require special attention.

This is a pilot program. It will demonstrate that older persons can help to improve the quality of community life by adding purpose and meaning to the lives of other elderly persons.

Service Program for the Aged. This unprecedented endeavor to sustain the elderly in independent living is now under way. Enrollment is limited to older people experiencing organic brain syndrome and other causes of withdrawal from reality.

Special Recreational Therapy, Reality Orientation and related programs are augmented as required with medical, social adjustment, speech and hearing and vocational services provided by ICD departments.

Government agencies and legislators are expressing considerable interest in the program. It may provide a basis for shaping new laws to aid the impoverished elderly, whose problems are a growing national concern.

Multiple-Handicap Rehabilitation for Young People. The Medical, Vocational and Social Adjustment Services are providing comprehensive rehabilitation for students in the New York public school system who are both deaf and mentally retarded. This is a joint endeavor with the City's Board of Education. Teachers report that the therapy these young people are receiving at the ICD has substantially improved their school work.

We see this endeavor as the first in a series of undertakings to meet the special requirements of youngsters and adults with a variety of multiple handicaps.

Projects With Industry. This is a three-year program for the placement of handicapped college graduates and for clerically trained clients of the ICD. The philosophy of Projects With Industry is that the rehabilitation and placement of handicapped persons can be accomplished more effectively when a close working relationship exists between employers and a vocationally oriented rehabilitation center such as the ICD.

The employer-rehabilitation joint endeavor involves evaluation, on-the-job training and counseling on the premises of participating companies, and job internships leading ultimately to regular employment. Personnel of the companies involved work with the ICD Projects With Industry team in shaping training curricula and in supplying some or all of the training and job orientation. ICD rehabilitation professionals provide supportive medical, psychological, counseling and placement services as required, along with follow-up counseling and consultation for handicapped employees and their employers.

The project is funded mainly by the Rehabilitation Services Administration of the U.S. Department of Health, Education and Welfare, and by an additional allocation from the New York State Office of Vocational Rehabilitation.

Micro-TOWER Institutional Services. This new department was established in August 1977 to make



Patients and clients served

our new Micro-TOWER group vocational evaluation system available to schools, hospitals, rehabilitation agencies, vocational evaluation centers, correction systems and institutions for the mentally ill. Regional representatives of Micro-TOWER Institutional Services have been designated in various parts of the country to assist organizations interested in making this efficient system part of their programs.

Precision Fluency Shaping Therapy for Stuttering Children. The ICD Speech and Hearing Institute is adapting the precision fluency shaping technique so that it can be of benefit to child stutterers as young as six years of age. The Institute had previously re-structured this method of modifying speech behavior from its original inpatient form so that it could be used to overcome stuttering in adults and youngsters of school age on an outpatient basis.

Voice Rehabilitation. The Speech and Hearing Institute has established a special service for professional voice users who encounter vocal problems. Advanced techniques for preventing loss of vocal capability are now available to singers, actors, executives, public officials and others who must make extensive use of their voices in pursuing their careers.

Human Services Assistant Training. This is the newest program in the ICD's continuing effort to broaden paraprofessional job opportunities for the handicapped. Human Services Assistants are trained by our Vocational Rehabilitation Service for employment in a number of health

related fields including social service, occupational therapy and physical therapy. They receive special instruction for the field they wish to enter. On the job, their work is to aid professionals in providing services to patients.

Second Careers for the Elderly With Sight Impairments. The ICD and the New York Infirmary's Center for Independent Living are developing a "Second Careers Counseling, Evaluation and Work Development Program for Older Visually Handicapped Adults." The job aptitude testing, work adjustment, training and placement services required will be provided by our Vocational Rehabilitation Service. An estimated 80 to 100 elderly persons with sight problems are expected to be served in this program over a three-year period.

Word Processing Technology Training. We are now preparing handicapped clients to operate modern word and information processing office equipment. This includes evaluation and training in the use of high speed typewriting systems with memory capabilities; new generations of reproduction, dictating, transcribing and micro-recording equipment; mini-computers, and mailroom facilities. The generous support of several foundations has made it possible for the ICD to acquire the equipment needed for instructional purposes. This upgrading of our vocational rehabilitation program is enabling the ICD to be more responsive to opportunities for the handicapped in the current labor market, and to qualify those we serve for good jobs in the

increasingly sophisticated field of office work.

Volunteer Program. The ICD has recently established a volunteer program with a wide range of interesting activities for those who would like to help the handicapped. Our first group of volunteers is working with older persons in the Service Program for the Aged. Plans for 1978 call for the expansion of volunteer activity to all treatment and training departments.

Professional Education

Courses, seminars and continuing education programs for professionals in rehabilitation and other health related fields have become a major ICD activity. Every treatment service and a number of other departments are making the results of their work available to all who serve the handicapped at well-attended meetings, through ICD publications and in professional papers.

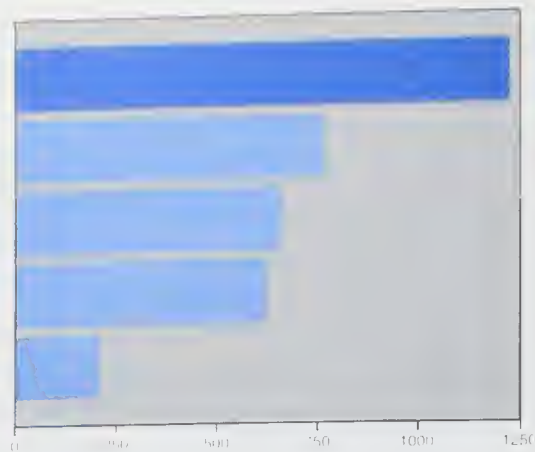
Here are just a few of the ICD's recent professional education activities and those scheduled for 1978:

Instructional videotapes: How to Develop a Work Sample, Parts I and II; Art Therapy in the Vocational Milieu, and Trigger Point Pressure Massage.

Program Evaluation publications issued by the ICD's Research Utilization Laboratory.

Two-Week Vocational Evaluation Workshops covering the aims and methodologies of major evaluation systems. The first of these ten workshops was held in early 1977. The last in the current series is scheduled for June 1978.

Mental and emotional
Speech and hearing
Orthopedic
Neurological
Cardiac and other



Types of disability served*

July 1, 1976—December 31, 1977

Major disability



Symposium on the Application of Reality Orientation to Problems of Aging. The first in this series of professional education programs was presented by the ICD as the Reality Orientation Center for the Northeast U.S. in May 1977. Other Reality Orientation presentations were conducted at Broome College, Binghamton, New York, and in Little Rock, Arkansas, at a conference conducted by Texas Tech University.

Public Relations and Community Education and Micro-TOWER Institutional Services Departments responded in many ways to the widespread interest in our new group technique for determining job aptitudes and potential. They presented professional papers, conducted workshops, published articles and staffed Micro-TOWER exhibits at professional meetings throughout the nation.



Placement Preparation Program Conference for government agency job placement specialists. This two-day meeting held at the ICD in January 1978, was attended by personnel from vocational rehabilitation departments in each of the fifty states. The curriculum was developed by the Research Utilization Laboratory. Many parts of the program were presented by the ICD's staff.

Staff Development Program

Professional and administrative skills at the ICD are being enhanced through a multi-faceted Staff Development Program. Its fundamental purpose is to enable staff members at all levels to participate with maximum effectiveness in the implementation of immediate and longer range objectives.

Clinical Experience for New York University Graduate Students in Speech Pathology and Audiology. This ongoing program of our Speech and Hearing Institute began in 1977.

The staff is kept informed of current and developing trends in and outside the rehabilitation field by prominent guest speakers at agency-wide meetings. Dr. Margaret Mead, the famed anthropologist, and Dr. Karl A. Menninger, dean of American psychiatry, head the list of leaders in their respective fields who are counseling with the staff. Both are Consultants to the ICD.

Continuing Education Program for the Care of Laryngectomees. This Speech and Hearing Institute program is for nurses and social workers at hospitals in the Greater New York metropolitan area. It provides insight into the special problems of persons who have had their voice boxes removed due to throat cancer, and guidance on how to work with them.

In-service education courses presented by department staffs enable those in other areas of the ICD to keep informed of new programs, activities and procedural changes.

Micro-TOWER Exhibits, Articles and Presentations. Staffs of our Research, Vocational Rehabilitation,

To enhance further the quality of care at the ICD, up-date training for specific professions is conducted regularly by our service directors and visiting lecturers from universities, other health related facilities and government agencies.

Vital Volunteer Work

A handicapped man who lives alone receives the guidance he needs for activities of independent living from a volunteer

Rehabilitating Multiple Handicaps

Deaf and mentally retarded teenagers learn to do meaningful work in the vocational phase of a special program for them at the ICD

Staff development for management and supervisory personnel includes training in advanced methods of cost efficiency, budget control, coordination and planning, and the administration of daily operations.

Visitations

Growing awareness that the ICD is making important advances in the field of rehabilitation attracted many visitors to our Center. They came from government and private organizations in the U.S. and from other countries.

We welcomed 11 members of a Congressional Panel on Research to Aid the Handicapped and their staff; a delegation of physicians and their laryngectomized patients from Japan; directors of rehabilitation centers, geriatric facilities and other health care organizations; executives of private foundations and large corporations, and officials of federal, state and city rehabilitation agencies. After they had seen the work we are doing for the handicapped, many thoughtful and stimulating discussions took place.

In turn, my fellow staff members and I have been enlightened by our visits to other facilities for the handicapped, and by our meetings with rehabilitation leaders throughout the nation and abroad.

Rehabilitation in my view is a boundless science. It is as unlimited as the afflictions which disable the body and mind. We have come a long way since the ICD was founded in learning how to overcome human handicaps; we have a long way to go



I find this tremendously challenging, as does the entire staff. We are grateful for the guidance and help that the Board of Trustees so readily gives to the work of making life more meaningful for those we serve. We deeply appreciate the growing financial support of the ICD by philanthropic people who care about the less fortunate. Together, we share an honorable commitment: to do our best for handicapped persons who want to make their lives worthwhile.

J.C. Folsom

J.C. Folsom, M.D.
Director

Without ever leaving the hospital, the patient can be taught to use the Medical College of Virginia's new "Medical College of Virginia" (M.C.V.) program. This program is designed to help the patient learn to use the "Medical College of Virginia" (M.C.V.) program. This program is designed to help the patient learn to use the "Medical College of Virginia" (M.C.V.) program.

Commitment To The Handicapped

Everyone has work to do in life. A wife and mother has a home to maintain, a family to care for. A child needs to gain an education, to become an adult capable of independent living. Men and women who have aptitudes and potentials for self-supporting jobs should have every opportunity to qualify for them. Elderly people should have the help they need to enjoy all their years.

This is what the ICD does for the handicapped of all ages. The Medical Service sees to their physical well-being. The Social Adjustment Service attends to mental and emotional problems. The Vocational Rehabilitation Service prepares those of working age to earn a living. The Speech and Hearing Institute overcomes communications disorders. The Service Program for the Aged enables older persons to overcome the handicaps of senility so they can continue to live on their own.

This is comprehensive rehabilitation. The ICD originated it almost a half-century ago. Today it is the world standard for rehabilitating the disabled.

There are many problems that beset handicapped persons for which there still are no solutions. The ICD is dedicated to finding the answers. We seek to know why and how these problems cause disability and, with that knowledge to develop rehabilitation programs for overcoming their handicapping effects.



Training for a Good Job

The ICD has upgraded its vocational training to include the use of sophisticated word processing systems. This young man is preparing for employment at a higher salary, and with better advancement opportunities than he could otherwise expect.

Advanced Social Adjustment Techniques

Videotape recordings of a group psychotherapy session, made with the clients' full knowledge, provide valuable insight for our staff in providing rehabilitation to overcome emotional problems.

Overcoming Communications Disorders ▶

Reading therapy helps a minister, left, make his way back from aphasia, a condition which disrupts one's ability to use and understand words.

in the room - Situate
Fragment ~~to~~ Fragmentary
luncheon
overt / overture
comprehend / comprehension
caligraphy / Calligrapher







More than 96 cents of every dollar expended by the ICD during the 10 months ended December 31, 1977 went for patient services, rehabilitation, research, professional education and the administrative services that support these programs.

Thousands of people and more than 100 foundations give each year to help the ICD carry on. Many give year after year, knowing that their gifts are greatly needed and purposefully used.

We have a deep responsibility to those from whom we receive financial support. Contributions, bequests and grants must be used for the purpose intended, rehabilitation activities that restore destitute handicapped people to the mainstream of life. We carry out this responsibility by maintaining strict fiscal and budgetary controls and by working constantly to improve the efficiency of our operations. No effort is spared in making each contributed dollar produce the maximum amount of service.



After a 4-week wait, the 40-year-old mother of four Chel Physio Therapist prepared to get full use of her legs for the first time using muscle strength equipment.

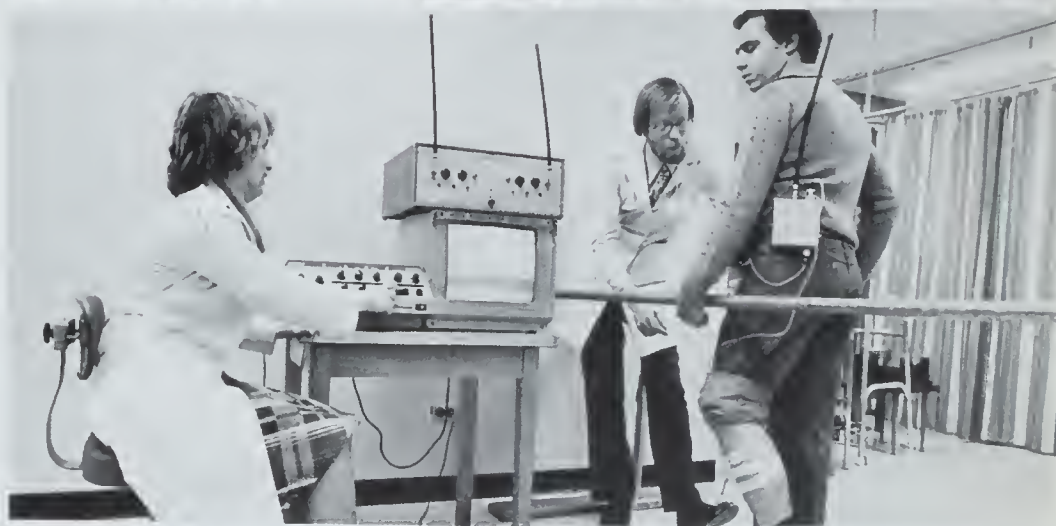
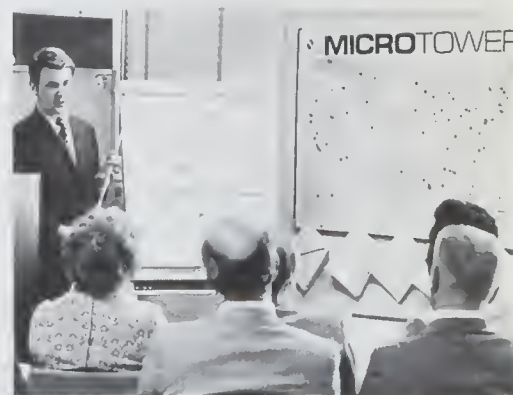
Commitment To Rehabilitation Progress

The ICD is a pioneering institution. The concept of vocationally oriented rehabilitation of the whole human being, the work sample method of vocational evaluation, rehabilitation of workmen's compensation cases—these and many other milestones in the progress of rehabilitation came from the ICD.

We view rehabilitation as a composite science. In seeking to cope with all the problems that handicapped persons face, the number of professions, disciplines and skills that can and should be brought to bear is as broad as the health care field itself.

Accordingly, the current work of the ICD to advance our science has three major thrusts: reach out to other areas of health care for new developments that can be adapted to improve the effectiveness of rehabilitation; demonstrate that rehabilitation techniques of proven value can add to the efficacy of treatment in other health care fields, and upgrade rehabilitation management and administrative skills for the coordination of expanded services into a unified attack upon compound handicaps.

Our guideline for these endeavors is that what the ICD is doing today, others in rehabilitation will want to do tomorrow. Through continued mutual sharing of accomplishments, the needs of the handicapped everywhere will be served.



Sharing New ICD Developments

Regional representatives who are making our new Micro-TOWER™ vocational evaluation system available to all who serve the handicapped attend a briefing session at the ICD.

Reality Orientation Symposium

The ICD's first symposium on the application of Reality Orientation to the problems of the aging drew a capacity enrollment. Conducted by Dr. J.C. Fromm, Director of ICD, this 1977 event marked the establishment of our Reality Orientation Center for the Northeast U.S.

Advanced Sensory Feedback Therapy

The development of radio transmission equipment which enables a patient with a leg disability to move about during treatment has improved the service which our Sensory Feedback Therapy Unit provides.

Helping the Handicapped Nationwide ▶

Audio cassette recordings, information dissemination and publications by the ICD's Research Utilization Laboratory enable state vocational rehabilitation programs throughout the nation to keep up-to-date on new developments.



Commitment To The Community

Rehabilitating the handicapped so that they cease to be a burden on the community is the ICD's traditional work.

More than four-fifths of our patients and clients during the period covered by this report were of working age: 16 to 64. Many were on public welfare when they came to us. Our vocational rehabilitation and other services enabled them to obtain self-supporting employment. Others who, because of physical and emotional problems, had lost their jobs and were on unemployment compensation, were provided with rehabilitation programs so that they could go back to work.

Reaching the handicapped to earn their own livings is one thing, finding suitable jobs for them is another. This is the work of the ICD's job placement specialists and Projects With Industry staff. They work closely with employers to match a rehabilitated handicapped person and a job for which he or she has been trained. And they follow up on each job placement to assure that it is working out. If a problem arises, immediate action is taken to solve it. More times than not, one placement of a person rehabilitated at the ICD opens the

door for another; satisfied employers ask for more of our qualified job candidates.

The ICD serves the community in many ways; with help for confused elderly persons who unknowingly are disrupting the lives of their neighbors, with counseling and guidance for the families of the handicapped, with speakers who assist the non-disabled to understand and accept handicapped people who live among them, with evening hours for those who need our services and cannot come for them during the day.

Community support makes the ICD's work possible: we respond to the community's needs in every way we can.



Pioneering Program for the Elderly.
In ICD's new outpatient Service Program for the Aged, an elderly client receives the personal counseling he needs.

Projects With Industry
This seriously disabled young man was one of more than 50 handicapped college graduates successfully placed in jobs for which they are qualified through the joint efforts of the ICD and participating corporations.

Evening Rehabilitation Services ►
The ICD provides rehabilitation services during evening hours for handicapped persons like this young lady who cannot come for treatment during the day.



Balance Sheets

December 31, 1977 and June 30, 1976

	December 31, 1977	June 30, 1976
Assets		
Current Funds—General and Unrestricted		
Cash	\$ 346,540	\$ 357,268
Investments:		
Marketable securities (quoted market value: 1977, \$16,860,910; 1976, \$18,251,793) (Note 1)	14,827,698	15,250,194
Certificate of deposit		100,000
Mortgage loan receivable		1,750
Receivables—Principally trade (less allowance for doubtful accounts: 1977, \$28,300; 1976, \$15,339)	642,255	472,744
Inventory (Note 1)	181,608	
Other Assets—Principally prepaid expenses	217,256	186,338
Total	\$16,215,357	\$16,368,294
Current Funds—Restricted		
Cash	\$ 10,890	\$ 29,982
Investments—Marketable securities (quoted market value: 1977, \$75,805; 1976, \$68,788) (Note 1)	75,805	78,440
Receivables—Principally grants	269,333	382,794
Due from General and Unrestricted Funds	486,892	217,410
Total	\$ 842,920	\$ 708,626
Land, Building and Equipment Fund		
Land (Note 1)	\$ 228,389	\$ 228,389
Building (less accumulated depreciation: 1977, \$873,929; 1976, \$719,975) (Note 1)	2,707,888	2,861,759
Equipment (less accumulated depreciation: 1977, \$329,632; 1976, \$264,674) (Note 1)	451,190	403,066
Total	\$ 3,387,467	\$ 3,493,214
Endowment Fund		
Investments—Marketable securities (quoted market value: 1977, \$588,856; 1976, \$562,090) (Note 1)	\$ 483,938	\$ 438,957
Due from General and Unrestricted Funds	502,234	547,215
Total	\$ 986,172	\$ 986,172

See the accompanying Notes to Balance Sheets

Liabilities and Fund Balances	December 31, 1977	June 30, 1978
Current Funds—General and Unrestricted		
Accounts Payable and Accrued Liabilities	\$ 289,286	\$ 250,214
Due to Current Restricted Funds	486,892	217,410
Due to Endowment Funds	502,234	547,215
Total Liabilities	1,278,412	1,014,839
General and Unrestricted Fund Balances		
General fund	14,434,465	14,854,284
Board designated funds	502,480	499,171
Total general and unrestricted fund balances	14,936,945	15,353,455
Total	\$16,215,357	\$16,368,294
Current Funds—Restricted		
Fund Balance	\$ 842,920	\$ 708,626
Total	\$ 842,920	\$ 708,626
Land, Building and Equipment Fund		
Fund Balance	\$ 3,387,467	\$ 3,493,214
Total	\$ 3,387,467	\$ 3,493,214
Endowment Fund		
Fund Balance	\$ 986,172	\$ 986,172
Total	\$ 986,172	\$ 986,172

See the balance sheet and additional ICD
 statements for the eighteen months ended
 December 31, 1977 which have been audited by
 independent public accountants are available by
 request to the Rehabilitation and Research Center
 47 East 4th Street, New York, N.Y. 10010

1. Summary of Significant Accounting Policies

The financial statements of the Center are prepared on the accrual basis of accounting. The accounts are maintained in the following fund groupings: general and unrestricted funds, which are used to meet current operating needs, including board designated funds which may be used at the discretion of the Board of Trustees; restricted funds, which may be used only for purposes designated by the donor or grantor; land, building and equipment fund, which accounts for funds received for and invested in property; and the endowment funds, which, by donor designation, are nonexpendable.

Marketable securities are stated at cost or, as to donated securities, at market values at dates of acquisition.

Inventory, which consists of supplies of testing materials, is stated at the lower of cost, determined on the first-in, first-out basis, or market.

Property is stated at cost. Depreciation is calculated on the straight-line method over the estimated useful lives of the assets, which are sixty years for buildings and five to twenty years for equipment. Expenditures from general and unrestricted funds for property additions are recorded as interfund transfers and are capitalized in the land, building and equipment fund.

In 1977, the closing date of the Center's fiscal year was changed from June 30th to December 31st.

2. Pension Plan

The Center has a trustee-administered pension plan covering substantially all employees. Its policy is to fund pension costs accrued. In fiscal 1976, prior service costs of \$147,690 were funded in full and the Center commenced amortizing such amount over a 10 year period beginning July 1, 1975.

ICD Rehabilitation and Research Center:

We have examined the balance sheets of ICD Rehabilitation and Research Center as of December 31, 1977 and June 30, 1976. Our examinations were made in accordance with generally accepted auditing standards and, accordingly, included such tests of the accounting records and such other auditing procedures as we considered necessary in the circumstances.

In our opinion, the accompanying balance sheets present fairly the financial position of the Center at December 31, 1977 and June 30, 1976, in conformity with generally accepted accounting principles applied on a consistent basis.

Haskins & Sells

New York, New York.

April 12, 1978

You may obtain a copy of the financial statements filed with the New York State Board of Social Welfare by writing to:
ICD Rehabilitation and Research Center
340 East 24th Street
New York, N.Y. 10010
or
New York State Board of Social Welfare
Charities Registration Section
Office Tower
Empire State Plaza
Albany, N.Y. 11242

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Senior Staff

The Director
James C. Folsom, M.D.

Assistant Director
David S. Reynolds, Ph.D.

**Vocational & Industrial
Rehabilitation Service**
Bernard Rosenberg, M.A.
Director

Sidney Heymann, M.S.E.
Supervisor, Evaluation

Barbara Schultz, M.L.
Supervisor, Placement

Robert DeBlasi, M.A.
Supervisor, Workshop

Seymour Tuchband, M.A.
Senior Counselor

Norma Walker
Supervisor, Educational Services

Medical Service
Milton Lowenthal, M.D.
Director

Theodore Corbitt, M.A.
Chief, Physical Therapy

Barbara Low, B.S.
Chief, Occupational Therapy

Sensory Feedback Therapy Unit
Joseph Brudny, M.D.
Director

Speech and Hearing Institute
Elizabeth L. Allen, Ph.D.
Director

Nina Hill, M.S.
Supervisor, Speech Pathology

Geri Hudis, M.S.
Supervisor, Audiology

**Reality Orientation/
Staff Development**
Kenneth Pommerenck, M.A.S.A.
Director

Russell J. Ackaway, M.A.
Supervisor, Staff Development

Social Adjustment Service
Joseph Grimaldi, Ph.D.
Director

Projects With Industry
John C. Deely, M.S.W.
Director

**Vocational and Social Science
Research**
Margaret E. Backman, Ph.D.
Director

Research Utilization Laboratories
Isabel P. Robinault, Ph.D.
Supervisor

Milbank Research Laboratories
Eugene Flamm, M.D.
Director

**Bruce Barton
Memorial Library**
Helen Stonehill, M.L.S.
Chief Librarian

**Micro-TOWER™ Institutional
Services**
Henry M. Gridley
Director

**Public Relations Community
Education Development**
Donald G. Weiss, B.A.
Director

Administrative Service
Edward J. Kelly
Director

Employee Relations
Albert M. Murray, M.B.A.
Director

Accounting
Raymond J. Rvdzewski
Comptroller

Engineering
Patrick J. Downey
Director

Pioneering Accomplishments Of The ICD

- First rehabilitation center in the United States. (Founded in 1917.) Rehabilitation research, professional education, and patient services programs inaugurated.
- First to rehabilitate a victim of industrial accident under Workmen's Compensation. (1920)
- First to produce a rehabilitation education film (1925) which was used throughout the world to train rehabilitation workers.
- First Hudson River cruise and Day in the Sun provided for New York City's handicapped. (1925) This annual event, which has taken place for more than 50 years, is the ICD's observance of Founder's Day.
- First to establish a sheltered workshop as part of a rehabilitation program. (1927)
- First comprehensive rehabilitation center with medical, vocational and social adjustment services. World pattern established for service to the disabled. (1935)
- Development of the TOWER System which uses work samples in determining what types of work a handicapped person can do best. (1936) TOWER System is now world standard for vocational evaluation of the disabled.
- First to focus comprehensive rehabilitation services upon the problems of the very seriously disabled. (1942)
- Training of U.S. Air Force medical personnel for rehabilitation of disabled veterans provided by ICD. This was the beginning of government's rehabilitation program for servicemen and veterans of World War II. (1943)
- Veterans Administration and Army personnel trained to set up and operate rehabilitation programs for servicemen and veterans. (1945)
- Internships and training programs for psychologists in rehabilitation. (1951)
- Established new rehabilitation program especially for arthritis victims. (1953)
- Team work training for the growing range of professional, technical and administrative persons engaged in rehabilitation services for the disabled. (1954)
- Comprehensive training for limb and brace makers to help meet the worldwide shortage. (1955)
- First to devise vocational evaluation procedures especially for the cerebral palsied. (1957)
- Major advance in rehabilitation research and training of persons for careers in rehabilitation through professional affiliation with New York University. (1958)
- First to demonstrate that handicapped persons with emotional disabilities can be successfully served in a rehabilitation center treating all types of disabilities. (1955-1960)
- First to design and construct a building for rehabilitation, research and professional education. (Dedicated May 24, 1962)
- Establishment of mental health clinic within the ICD Social Adjustment Service to meet the special needs of emotionally disabled persons. (1966)
- Establishment with New York University Medical Center of the Milbank Research Laboratories, named in honor of Jeremiah Milbank, ICD's Founder, to pursue basic medical research relating to disability. (1967)
- Extended ICD vocational rehabilitation services to handicapped persons on welfare under the WIN (Work Incentive) program. (1969)
- Established the Research Utilization Laboratory at ICD, under grant from the U.S. Rehabilitation Services Administration, to adapt effective research conducted by others for widespread practical application to disabled people on welfare. (1970)
- Adapted videotape facilities for use in rehabilitation research, professional education and patient services. (1971)
- In its Milbank Research Laboratories, documented for the first time that hemorrhaging as a result of spinal cord injury is the cause of paraplegia and quadriplegia. (1972)
- In its Research Utilization Laboratory, determined the usefulness of the leaderless group discussion technique for training economically disadvantaged persons for the job market. (1973)
- Sensory feedback therapy unit, one of the first in the country, opened at ICD to treat patients with long-standing disorders of voluntary movement or hemiparesis related to stroke. (1974)
- Speech and Hearing Institute joined ICD, adding its specialized diagnostic and treatment programs to the broad range of rehabilitation services of ICD. (1975)
- ICD Research Unit developed Micro-TOWER, a unique group-administered vocational evaluation system. (1975)
- Reality Orientation and Attitude Therapy techniques applied for first time in rehabilitation of handicapped persons in outpatient center. (1976)
- Micro-TOWER field testing completed. Micro-TOWER Institutional Services established to make this new system available to schools, hospitals, correction facilities, industry and other rehabilitation agencies. (1976-1977)
- ICD established as the Northeast U.S. Center for education and training in Reality Orientation and Attitude Therapy. (1977)
- Precision fluency shaping therapy adapted to overcome stuttering by children as young as six years of age. (1977)

ICD Memberships

American Hospital Association—Institutional Membership
Association of Rehabilitation Facilities
National Conference of Social Welfare
National Rehabilitation Association
New York State Welfare Conference, Inc
The President's Committee on Employment of the Handicapped

ICD Certifications and Accreditations

American Personnel and Guidance Association
Bureau for Handicapped Children, New York City Department of Health
Commission on Accreditation of Rehabilitation Facilities (CARF)
International Association of Counseling Services, Inc
New York City Board of Education, Division of the Physically Handicapped
New York City Department of Health
New York State Department of Health
New York State Department of Mental Hygiene
Social Security Administration, Department of Health, Education and Welfare
U.S. Department of Labor, Wage and Hour and Public Contracts Division
Veterans Administration



ICD Rehabilitation and Research Center
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